State of South Dakota



Candidate's or Committee's Report of Receipts and Expenditure ECEIVED

Candidates and candidate committees: File in the office where you filed your nominating periodic.

PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office, S.D. SEC. OF STATE See pages 9 & 10 of the Guideline Book for specific instructions on completing this report. Otter Tail Lower Company & mployees association Name of Candidate or Committee Jou Improvement on Movemment Complete Mailing Address PQ Box 10 Walnuton NO 58074 Daytime Phone Number 201.691.6001 Name of Person Making Report Geri Coune If you are a candidate, what office are you seeking? If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed. Type of Report (See pages 4 & 5 of Guideline Book) SOCL 12 15 13 For Reporting Period Ending (See pages 4 & 5 of Guideline Book) The following verification must be completed before submitting report. VERIFICATION OF PERSON MAKING REPORT ____(print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. Candidate Signature of Signature of Committee Treasurer or Chairperson

Revised July 2001

Appendix B

Name of Candidate or Committee Journal over Language Lang

For the reporting period ending

Schedule A – Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

Unitemized Contributions from Individuals:

*\$ 218.15

Itemized Contributions from Individuals

Name	Residence Address	Place of Employment (Name of Employer)	
Kevin D Kouba	309 Gause Ave Milbank &D 576	Otter Tail Power Co	\$ <u> </u> \$ <u> </u> 125.00 \$
John Maefaxlane	911 S Arlington Sergus Palls, Mw 56537	Retired	\$
Arvid Liebe	104 W 80 Ave Milbank SD 57430	Liebe Drug	\$ \$
Thomas Brown	Ste 500 60 5 6 5+ Mals MN 55402-1498	Retired	\$ \$ <u> 150.00</u> \$
Robert Spolum	417 Main Ave Fargo NO 58102	Robert N Spolum V Assoc	\$ \$_160.00 \$
			\$ \$ \$
			\$ \$
			\$
			\$
			\$
Total of Itemized Contribution			\$ \$ *\$

•,		Appendix B
Name of Candidate or Committee_	La Improvement in Hoot	
For the reporting period ending	5 a2 o4	
Schedule	e A – Direct Contributions (continued)	
	•	*\$
Unitemized Contributions from Political P	arties:	
Itemized Contributions from Political Part	ties	
Party Name	Address	
		<u> </u>
		\$
The last the state of the state		*\$
Total of Itemized Contributions from Police	ucai Parties:	·•
		•
Itemized Contributions from Political Acti	ion Committees (PAC's) - All contributions from PAC's	must be itemized.
PAC Name	Address	· ·
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		*
		\$
		\$
	•	\$
		\$
		\$
		\$
		\$
		\$
Total of Itemized Contributions from Poli	itical Action Committees:	*\$
Total of All Direct Contributions (Sum of	f all lines with an *)	\$ 913.15

Name of Candidate or Committee:		
For the reporting period ending:	- Annual III	
Schedule B de List on this schedule fund-raising events held to raise contributor gives more than \$100 or their contribution contributions must be itemized on Schedule A.	Fund-Raising Events Proceeds on results in their aggregate being more than \$100	lerived from each event. If a 0 in the calendar year, those
Type or Name of Event		Net Proceeds
Total:		
Report all non-cash contributions of goods or service contributor, residence address and place of employm Nature of Non-Cash Contribution		Estimated Value
	· · · · · · · · · · · · · · · · · · ·	
Total:	5-T-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
Sch Use this schedule to report any refunds, interest earn	nedule D - Other Income ned or other income which is not a direct contribu	ution.
Source of Income		Amount
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-
Total:		

Tail fower (o Employes	Pesser	Appendix B
--------------	------------	--------	------------

Name of Candidate or Committee	: La amprovement in	Book a
For the reporting period ending:	V	

Schedule E – Expenditures

This schedule is to report all expenditures relating to a candidate's campaign. Line items have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

	enses	Contributions Made to Candidates and	1
Item	Amount	Name of Candidate or Committee	Amount
Advertising		Diedrich For Congress	చరిర [ా]
Consulting		Ò	
Postage			
Printing			
Rent			
Kent Salaries			·
=			
Telephone			
Fravel		- · · · · · · · · · · · · · · · · · · ·	
Utilities			
List other expense	List other expense		
items below	amounts below		
· · · · · · · · · · · · · · · · · · ·			
		100 to the first of the second state of the se	
	-	***	
	· · · · · · · · · · · · · · · · · · ·	**************************************	
			
			
· · · · · · · · · · · · · · · · · · ·			
,			
	·	***************************************	
	<u> </u>	——————————————————————————————————————	
· · · · · · · · · · · · · · · · · · ·		And the state of t	
,			
Total Expenditures:		•	\$00 %

	Calcalate Data AONE	4.		
Schedule F - Debts and Obligations This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service service service is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service service service is to report all of the candidate's campaign obligations.				
wed to:	Purpose:	Amount		
<u> </u>	<u> </u>			
· <u></u>				
,				
· · · · · · · · · · · · · · · · · · ·				
· · · · · · · · · · · · · · · · · · ·				

Name of Candidate or Committee: Otter Tail Power Co Employees Osan for Improvement or Appendix B For the reporting period ending: 5/22/04				
	s summary sheet will give a brief outline of all camp n the schedules previously completed.	Summary Page paign finance activity during this reporting period. Plea	se transfer all totals	
1.	1. Amount on hand, if any, at the beginning of the reporting period: \$\\\ \bar{822.33}\$		<u>822.33</u>	
2.	Receipts			
	Schedule A - Direct Contributions	\$ <u>973.75</u>		
	Schedule B - Fund-Raising Events	\$		
	Schedule C - In Kind Contributions	\$		

\$<u>973.75</u>

\$<u>973.15</u>

\$____

\$<u>500.00</u>

\$ 1296.08

Schedule D - Other Income

Expenditures - Schedule E

Unpaid Obligations - Schedule F

7.

Total Monetary Receipts (A+B+D)

Candidate's Personal Contribution to Own Campaign

Monetary Loans Repaid During Reporting Period

Amount on hand at the close of this reporting period. *

This should equal lines (1+3+4+5) - (6+7)

Monetary Loans to Candidate or Committee During Reporting Period

Total of all Receipts

